

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

CAMPAIGN FOR WORKING FAMILIES

ADDRESS (number and street)

2800 SHIRLINGTON ROAD, SUITE 930

☐ Check if different than previously reported. (ACC)

ARLINGTON

VA

22206

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00325076

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☒ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

11

04

2014

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

in the  
State of

5. Covering Period

10

01

2014

through

10

15

2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Dorie Velezis

Signature of Treasurer

Dorie Velezis

[Electronically Filed]

Date

10

23

2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

CAMPAIGN FOR WORKING FAMILIES

Report Covering the Period: From: M M / D D / Y Y Y Y Y 10 / 01 / 2014 To: M M / D D / Y Y Y Y Y 10 / 15 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</span> 2014		<span style="border: 1px solid black; padding: 2px;">776204.10</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">501986.00</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">9467.47</span>	<span style="border: 1px solid black; padding: 2px;">261862.35</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">511453.47</span>	<span style="border: 1px solid black; padding: 2px;">1038066.45</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">78991.60</span>	<span style="border: 1px solid black; padding: 2px;">605604.58</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">432461.87</span>	<span style="border: 1px solid black; padding: 2px;">432461.87</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">7398.57</span>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

CAMPAIGN FOR WORKING FAMILIES

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
10	/	01	/	2014

To:

M M	/	D D	/	Y Y Y Y
10	/	15	/	2014

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

7817.00

169008.05

(ii) Unitemized .....

1650.47

92477.17

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

9467.47

261485.22

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

9467.47

261485.22

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

377.13

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

9467.47

261862.35

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

9467.47

261862.35

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	7991.60	329469.58
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	7991.60	329469.58
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	55000.00	257500.00
24. Independent Expenditures (use Schedule E) .....	0.00	1625.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	10.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	10.00
29. Other Disbursements .....	16000.00	17000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	78991.60	605604.58
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	78991.60	605604.58

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	9467.47	261485.22
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	10.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	9467.47	261475.22
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	7991.60	329469.58
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	7991.60	329469.58

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 47  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. MR CHARLES D AYRES**

Mailing Address 4911 CASA ORO DR

City

YORBA LINDA

State

CA

Zip Code

92886

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary  
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 07 / 2014

Transaction ID : SA11AI.13030

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. DAVID BAIN**

Mailing Address 1000 PECAN DR

City

MCKINNEY

State

TX

Zip Code

75069

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CORWIN ENGINEERING INCORPORATED

Occupation

ENGINEER

Receipt For: 2014

☐ Primary  
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 06 / 2014

Transaction ID : SA11AI.13004

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. DR GARY R BISHOP**

Mailing Address 15144 LARRY ST

City

POWAY

State

CA

Zip Code

92064

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RIVERSIDE COUNTY

Occupation

PHARMACIST

Receipt For: 2014

☐ Primary  
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 06 / 2014

Transaction ID : SA11AI.13026

Amount of Each Receipt this Period

35.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

185.00

**TOTAL** This Period (last page this line number only)..... ►

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.13030

0103804-0000073

Form/Schedule: SA11AI

Transaction ID: SA11AI.13004

0104630-0000048

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A=N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.13026

0009108-0000069

Form/Schedule:

Transaction ID:



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

CAMPAIGN FOR WORKING FAMILIES

Full Name (Last, First, Middle Initial)

**A. MR PHIL BOLLINGER**

Mailing Address 1901 CANTERBURY COURT CV

City State Zip Code  
 CORDOVA TN 38016

FEC ID number of contributing federal political committee.

C

Name of Employer

ST FRANCIS

Occupation

IT MGR

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 14 2014

Transaction ID : SA11AI.12978

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MR TERRY O BRISTOL**Mailing Address 1304 DUFF DR  
STE 2 OFFICE 5

City State Zip Code  
 FORT COLLINS CO 80524

FEC ID number of contributing federal political committee.

C

Name of Employer

344E FOOTHILLS PARKWAY FC  
COLORADO

Occupation

ASSET MGR

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 06 2014

Transaction ID : SA11AI.13016

Amount of Each Receipt this Period

38.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MR DEL C BROOKS**

Mailing Address 12789 MUIRFIELD BLVD N

City State Zip Code  
 JACKSONVILLE FL 32225

FEC ID number of contributing federal political committee.

C

Name of Employer

SMURFIT STORE CONT. CORP

Occupation

GEN MGR

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 03 2014

Transaction ID : SA11AI.12965

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

113.00

TOTAL This Period (last page this line number only)..... ►

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A-N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : SA11AI.12978  
0108922-0000026

Form/Schedule: SA11AI  
Transaction ID: SA11AI.13016  
0024811-0000059

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+9A=N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.12965

0012784-0000013

Form/Schedule:

Transaction ID:

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. MR CRAIG W EGLOFF**

Mailing Address 27001 HIGHWAY 128

City State Zip Code  
YORKVILLE CA 95494

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JAYMES & JAYMES

Occupation

INSURANCE BROKER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 14 / 2014

Transaction ID : SA11AI.13034

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MR JAMES S ENGLUND**

Mailing Address 6004 WOODGLEN CT

City State Zip Code  
MOBILE AL 36609

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

ENGINEER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 15 / 2014

Transaction ID : SA11AI.12975

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MR FRANCIS L FRIEND**

Mailing Address 2125 LUANN LN APT 6

City State Zip Code  
MADISON WI 53713

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

CONSULTANT

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 06 / 2014

Transaction ID : SA11AI.12990

Amount of Each Receipt this Period

50.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

550.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : SA11AI.13034  
0101847-0000077

Form/Schedule: SA11AI  
Transaction ID: SA11AI.12975  
0014348-0000022

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.12990

0100234-0000036

Form/Schedule:

Transaction ID:

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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PAGE 15 OF 47

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. MR CARL W GUSTKE**

Mailing Address 233 STATON RD

City  
CABOT

State Zip Code  
AR 72023

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FEDERAL EX - (WIFE) REBSAMEN R. H.

Occupation  
PILOT - WIFE DEBORAH-RN

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 06 / 2014

Transaction ID : SA11AI.13000

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MR CLAYTON L HOWIE**

Mailing Address 1673 POPLAR LN

City  
CAMANO ISLAND

State Zip Code  
WA 98282

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
THE SEATTLE TIMES

Occupation  
ASSISTANT MANAGER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 08 / 2014

Transaction ID : SA11AI.13040

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. Dr. DAVID S HUNGERFORD**

Mailing Address 10715 POT SPRING RD

City  
COCKEYSVILLE

State Zip Code  
MD 21030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
SURGEON

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 06 / 2014

Transaction ID : SA11AI.12959

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1075.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : SA11AI.13000  
0022519-0000045

Form/Schedule: SA11AI  
Transaction ID: SA11AI.13040  
0100387-0000084



: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+9A=N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.12959

0002486-0000006

Form/Schedule:

Transaction ID:

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 18 OF 47

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. MR ALDEN P JOHNSON**

Mailing Address 5010 LA BARRANCA ST

City

SAN ANTONIO

State

TX

Zip Code

78233

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

MORTGAGE LOAN OFFICER

Receipt For: 2014

☐ Primary  
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

10 / 06 / 2014

Transaction ID : SA11AI.13014

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MR JAMES J KAZMIERZAK**

Mailing Address 11808 EAGLE VIEW COURT

City

FORT WAYNE

State

IN

Zip Code

46814

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFO REQUESTED- NOT RECD

Occupation

INFO REQUESTED- NOT RECD

Receipt For: 2014

☐ Primary  
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

376.00

Date of Receipt

10 / 15 / 2014

Transaction ID : SA11AI.12983

Amount of Each Receipt this Period

94.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. DR JOHN D KEISLING**

Mailing Address 35 ERICA LN

City

BELEN

State

NM

Zip Code

87002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LEIDOS

Occupation

SCIENTIST

Receipt For: 2014

☐ Primary  
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

800.00

Date of Receipt

10 / 15 / 2014

Transaction ID : SA11AI.13023

Amount of Each Receipt this Period

40.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

159.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : SA11AI.13014  
0104518-0000057

Form/Schedule: SA11AI  
Transaction ID: SA11AI.12983  
0111250-0000030

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.13023

0100128-0000066

Form/Schedule:

Transaction ID:

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 OF 47

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial) <b>A. MRS BONNIE MCCONNELL</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>10 / 03 / 2014</div> </div>	
Mailing Address 6960 CITRUS DRIVE			<b>Transaction ID : SA11AI.12967</b>	
City SEMINOLE	State FL	Zip Code 33772	Amount of Each Receipt this Period <div> <div>Y Y Y Y Y</div> <div>35.00</div> </div>	
FEC ID number of contributing federal political committee. C			CONTRIBUTION	
Name of Employer PUBLIC SCHOOL SYSTEM		Occupation TEACHER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>Y Y Y Y Y</div> <div>855.00</div> </div>		

Full Name (Last, First, Middle Initial) <b>B. MR STEPHEN N MCCOY</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>10 / 03 / 2014</div> </div>	
Mailing Address 6500 TERRACE DR			<b>Transaction ID : SA11AI.12995</b>	
City DOWNERS GROVE	State IL	Zip Code 60516	Amount of Each Receipt this Period <div> <div>Y Y Y Y Y</div> <div>25.00</div> </div>	
FEC ID number of contributing federal political committee. C			CONTRIBUTION	
Name of Employer SELF		Occupation SELF		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>Y Y Y Y Y</div> <div>339.00</div> </div>		

Full Name (Last, First, Middle Initial) <b>C. MRS MAE L MCKINLEY</b>			Date of Receipt <div> <div>M M / D D / Y Y Y Y Y</div> <div>10 / 15 / 2014</div> </div>	
Mailing Address 515 11TH AVENUE NE			<b>Transaction ID : SA11AI.12993</b>	
City MINOT	State ND	Zip Code 58703	Amount of Each Receipt this Period <div> <div>Y Y Y Y Y</div> <div>50.00</div> </div>	
FEC ID number of contributing federal political committee. C			CONTRIBUTION	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <div> <div>Y Y Y Y Y</div> <div>500.00</div> </div>		

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

110.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : SA11AI.12967  
0108135-0000015

Form/Schedule: SA11AI  
Transaction ID: SA11AI.12995  
0019957-0000041

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.12993

0101794-0000039

Form/Schedule:

Transaction ID:

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 24 OF 47

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. JEAN NEWTON**

Mailing Address 1330 COOSA RIVER RD

City State Zip Code  
DEATSVILLE AL 36022

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 06 / 2014

Transaction ID : SA11AI.12971

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MR EDWARD M NICHOLS**

Mailing Address 500 SUMMIT LAKE DR STE 120

City State Zip Code  
VALHALLA NY 10595

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FUSION FINANCIAL GROUP

Occupation

SELF

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 14 / 2014

Transaction ID : SA11AI.12953

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. Mr. WARREN SIMANDLE**

Mailing Address 2322 VISTA MADERA

City State Zip Code  
SANTA BARBARA CA 93101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SANTA BARBARA HIGH SCHOOL DIST

Occupation

PUBLIC SCHOOL TEACHER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 06 / 2014

Transaction ID : SA11AI.13031

Amount of Each Receipt this Period

25.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

100.00



: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A-N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : SA11AI.12971  
0106562-0000019

Form/Schedule: SA11AI  
Transaction ID: SA11AI.12953  
0105268-0000002

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : SA11AI.13031  
0009367-0000074

Form/Schedule:  
Transaction ID:

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 27 OF 47

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. MRS DEBORAH E SMITH**

Mailing Address 3360 E TERRELL BRANCH CT SE

City State Zip Code  
MARIETTA GA 30067

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 06 / 2014

Transaction ID : SA11AI.12963

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MR LARRY T SMITH**

Mailing Address 3 OAKMONT LN

City State Zip Code  
NEWPORT BEACH CA 92660

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MITI REAL CO

Occupation

EXEL

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 07 / 2014

Transaction ID : SA11AI.13029

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MRS LINDA C SMITH**

Mailing Address 17618 REXWOOD ST

City State Zip Code  
LIVONIA MI 48152

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ARBOR HOSPICE

Occupation

RN

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 06 / 2014

Transaction ID : SA11AI.12984

Amount of Each Receipt this Period

25.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5050.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.12963

0027760-0000011

Form/Schedule: SA11AI

Transaction ID: SA11AI.13029

0009199-0000071

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.12984

0038656-0000031

Form/Schedule:

Transaction ID:

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 OF 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

## **A. LAKE C SPEED**

Mailing Address 4025 OLD SALISBURY CONCORD RD

City State Zip Code  
KANNAPOLIS NC 28083

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

REAL ESTATE MANAGER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 07 / 2014

Transaction ID : SA11AI.12961

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. MRS TAMMY E STEINBERG**

Mailing Address 101 WINDINGHAM DR NW

City State Zip Code  
HUNTSVILLE AL 35806

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HARRO APOTHERAPY

Occupation

HOMEMAKER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 06 / 2014

Transaction ID : SA11AI.12970

Amount of Each Receipt this Period

20.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. MR STEPHEN STUDE**

Mailing Address 32797 820TH ST

City State Zip Code  
BREWSTER MN 56119

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

FARMER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 06 / 2014

Transaction ID : SA11AI.12992

Amount of Each Receipt this Period

25.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

70.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : SA11AI.12961  
0027438-0000009

Form/Schedule: SA11AI  
Transaction ID: SA11AI.12970  
0011951-0000018

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A=N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.12992

0006116-0000038

Form/Schedule:

Transaction ID:



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 OF 47

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. MR MARK SWISHER**

Mailing Address 24902 N POINT PLACE

City State Zip Code  
 KATY TX 77494

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 AVIARA ENERGY CORPORATION

Occupation  
 ENGINEER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : SA11AI.13012**

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MR SCOTT THURMAN**

Mailing Address PO BOX 2589

City State Zip Code  
 CASHIERS NC 28717

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 INGLES-MARKETS

Occupation  
 PHARMACIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 / 14 / 2014

**Transaction ID : SA11AI.13042**

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MS SHIRLEY F TONN**

Mailing Address 3180 MADRONA ST

City State Zip Code  
 NORTH BEND OR 97459

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation  
 TEACHER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 / 13 / 2014

**Transaction ID : SA11AI.13038**

Amount of Each Receipt this Period

100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

350.00

: 97 `A-G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+9A-N5HCB  
.

Form/Schedule: SA11AI  
Transaction ID : SA11AI.13012  
0048257-0000055

Form/Schedule: SA11AI  
Transaction ID: SA11AI.13038  
0020877-0000082

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 35 OF 47

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. MRS LOIS WIERENGA**

Mailing Address 3442 OLDERIDGE DR NE

City State Zip Code  
 GRAND RAPIDS MI 49525

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 GRAND RAPIDS PUBLIC SCHOOLS

Occupation  
 TEACHER

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 / 06 / 2014

Transaction ID : SA11AI.12988

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MRS JUNE L ZEIGLER**

Mailing Address 739 E 2ND NORTH ST UNIT 363

City State Zip Code  
 MORRISTOWN TN 37814

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 RETIRED

Occupation  
 RETIRED

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 / 15 / 2014

Transaction ID : SA11AI.12977

Amount of Each Receipt this Period

30.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

55.00

7817.00

: 97 `A=G79 @G B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB  
.

Form/Schedule: SA11AI

Transaction ID : SA11AI.12988

0005517-0000034

Form/Schedule: SA11AI

Transaction ID: SA11AI.12977

0098488-0000025

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

## CAMPAIGN FOR WORKING FAMILIES

**A. 1st VIRGINIA COMMUNITY BANK**

Date of Disbursement

Transaction ID : SB21B.13044

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

Age Group	Percentage
18-24	10.0
25-34	15.0
35-44	20.0
45-54	25.0
55-64	30.0
65-74	35.0
75-84	40.0
85+	57.1

## B. AMERICAN EXPRESS

Date of Disbursement

Transaction ID : SB21B.13043

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Amount of Each Disbursement this Period

7.95

### C. AMERICAN EXPRESS

Date of Disbursement

Three digital displays are shown, each with a different set of missing segments. The first display shows '10' with missing segments for the top-left, top-right, and middle-right of the '1', and the top-left, top-right, and middle-right of the '0'. The second display shows '06' with missing segments for the top-left, top-right, and middle-right of the '0', and the top-left, top-right, and middle-right of the '6'. The third display shows '2014' with missing segments for the top-left, top-right, and middle-right of the '2', the top-left, top-right, and middle-right of the '0', the top-left, top-right, and middle-right of the '1', and the top-left, top-right, and middle-right of the '4'.

Transaction ID : SB21B.13046

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Amount of Each Disbursement this Period

7.95

**SUBTOTAL** of Disbursements This Page (optional).....

Age Group	Percentage
18-24	10
25-34	15
35-44	20
45-54	25
55-64	30
65-74	35
75-84	40
85+	73.01

**TOTAL** This Period (last page this line number only).....

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## CAMPAIGN FOR WORKING FAMILIES

### A. AMERICAN EXPRESS

Mailing Address P.O. BOX 299051

City	State	Zip Code
FT. LAUDERDALE	FL	33329

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.13048

Amount of Each Disbursement this Period

349.70

## B. AUTHORIZE.NET

Mailing Address P.O. BOX 8999

City	State	Zip Code
SAN FRANCISCO	CA	94128

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y  
10 02 2014

Transaction ID : SB21B.13045

Amount of Each Disbursement this Period

84.15

### C. BB&T

Mailing Address 2800 S Quincy St.

City	State	Zip Code
Arlington	VA	22206

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

State:  District:

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Three digital displays showing the date 10/15/2014 in MM/DD/YYYY format. The first display shows '10' for the month, the second shows '15' for the day, and the third shows '2014' for the year. Each display has a small 'M' or 'D' or 'Y' indicator above the digits.

Transaction ID : SB21B.13049

Amount of Each Disbursement this Period

1697.11

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2130.96

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 39 OF 47

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. CASTLE STRATEGIES**

Mailing Address 11105 HARROWFIELD ROAD

City CHARLOTTE      State NC      Zip Code 28226

Purpose of Disbursement  
PAC CONSULTING SOCIAL MEDIA

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2014
**Transaction ID : SB21B.13061**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. DEER PARK**

Mailing Address P.O. BOX 52271

City PHOENIX      State AZ      Zip Code 85072

Purpose of Disbursement  
OFFICE EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 08 / 2014
**Transaction ID : SB21B.13058**

Amount of Each Disbursement this Period

24.03

Full Name (Last, First, Middle Initial)

**C. FEDERAL EXPRESS**

Mailing Address P.O. BOX 1140

City MEMPHIS      State TN      Zip Code 28101

Purpose of Disbursement  
SHIPPING FEES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 08 / 2014
**Transaction ID : SB21B.13059**

Amount of Each Disbursement this Period

20.11

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2544.14

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## CAMPAIGN FOR WORKING FAMILIES

### A. FEDERAL EXPRESS

Three 7-segment displays are shown, each with a different number of segments lit. The first display shows '10' with 4 segments lit. The second display shows '15' with 5 segments lit. The third display shows '2014' with 7 segments lit. The displays are arranged horizontally and separated by slashes.

Category/  
Type

36.68

State:  District:

## B. HELLER INFORMATION SERVICES

Category/  
Type

211.50

State:  District:

### C. IRON MOUNTAIN

Category/  
Type

334.32

State:  District:

582.50



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 41 OF 47

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

## **A. LEXIS NEXIS**

Mailing Address P.O. BOX 7247-7090

City State Zip Code  
 PHILADELPHIA PA 19170

Purpose of Disbursement  
 DUES & SUBSCRIPTIONS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
 10 15 2014

**Transaction ID : SB21B.13064**

Amount of Each Disbursement this Period

350.00

Full Name (Last, First, Middle Initial)

## **B. LPS**

Mailing Address P.O. BOX 2325

City State Zip Code  
 FAIRFAX VA 22031

Purpose of Disbursement  
 PAC DATA PROCESSING SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
 10 15 2014

**Transaction ID : SB21B.13066**

Amount of Each Disbursement this Period

465.70

Full Name (Last, First, Middle Initial)

## **C. BILL MOELLER**

Mailing Address 2800 S SHIRLINGTON RD #930

City State Zip Code  
 ARLINGTON VA 22206

Purpose of Disbursement  
 TRAVEL EXPENSE REIMBURSEMENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
 10 02 2014

**Transaction ID : SB21B.13054**

Amount of Each Disbursement this Period

69.41

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

885.11

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## CAMPAIGN FOR WORKING FAMILIES

### A. OFFICE SHREDDING

Category/  
Type

State:  District:

## B. VERIZON

Category/  
Type

435.46

State:  District:

### C. DEAN VIRAG

Category/  
Type

500.00

State:  District:

980.46

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 43 OF 47

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. WASHINGTON INTELLIGENCE BUREAU**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2014

Mailing Address 4128 PEPSI PLACE

City	State	Zip Code
CHANTILLY	VA	20151

**Transaction ID : SB21B.13067**Purpose of Disbursement  
PAC CAGING AND DATA ENTRY SERVICES

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

795.42
--------

Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

--

Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

--

Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

795.42
--------

7991.60
---------

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 44 OF 47

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. CAM CAVASSO FOR U S SENATE**

Mailing Address 41-530 WAIKUPANAHA STREET

City WAIMANALO	State HI	Zip Code 96795
-------------------	-------------	-------------------

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**CAM CAVASSO FOR U S SENATE**

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: HI District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2014

**Transaction ID : SB23.13055**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**B. WOMEN SPEAK OUT PAC**

Mailing Address 1707 L STREET NW SUITE 550

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**WOMEN SPEAK OUT PAC**

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2014

**Transaction ID : SB23.13052**

Amount of Each Disbursement this Period

50000.00
----------

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

55000.00
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55000.00
----------

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 45 OF 47

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**CAMPAIGN FOR WORKING FAMILIES**

Full Name (Last, First, Middle Initial)

**A. AMERICAN TOMORROW, INC.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	10	/	2014

Mailing Address 1851 S. LANELINE BLVD., SUITE 104  
#110

City CEDAR PARK State TX Zip Code 78613

Purpose of Disbursement  
DONATION

Candidate Name

Category/  
Type**Transaction ID : SB29.13072**

Amount of Each Disbursement this Period

15000.00
----------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. BROWBACK FOR GOVERNOR, INC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2014

Mailing Address P.O. BOX 3739

City TOPEKA State KS Zip Code 66604

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type**Transaction ID : SB29.13070**

Amount of Each Disbursement this Period

1000.00
---------

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

--

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►

16000.00
----------

**TOTAL** This Period (last page this line number only)..... ►

16000.00
----------

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 46 OF 47

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**CAMPAIGN FOR WORKING FAMILIES**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**AMERICA DIRECT**

Nature of Debt (Purpose):

**PAC DIRECT MAIL PRODUCTION**

Mailing Address 1272 CORPORATE PARK DR

City State

FOREST

Zip Code

VA

24511

Outstanding Balance Beginning This Period

2955.31

Transaction ID : SD10.4357

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2955.31

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**CQ ROLL CALL**

Nature of Debt (Purpose):

**DUES AND SUBSCRIPTIONS**

Mailing Address 77 K STREET NE 8TH FL

City State

WASHINGTON

Zip Code

DC

20002

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.13075

Amount Incurred This Period

1899.25

Payment This Period

0.00

Outstanding Balance at Close of This Period

1899.25

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**DIRECTECH**

Nature of Debt (Purpose):

**CAGING AND DATA PROCESSING  
SERVICES**

Mailing Address 8595 GROVEMONT CIRCLE

City

GAITHERSBURG

State

MD

Zip Code

20877

Outstanding Balance Beginning This Period

223.11

Transaction ID : SD10.4359

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

223.11

1) **SUBTOTALS** This Period This Page (optional)..... ►

5077.67

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 47 OF 47

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**CAMPAIGN FOR WORKING FAMILIES**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**LPS**

Nature of Debt (Purpose):

**PAC DATA PROCESSING SERVICES**

Mailing Address P.O. BOX 2325

City State

FAIRFAX

Zip Code

VA

22031

Outstanding Balance Beginning This Period

465.70

Transaction ID : SD10.12947

Amount Incurred This Period

0.00

Payment This Period

465.70

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**MWM DIRECT MARKETING SERVICES**

Nature of Debt (Purpose):

**PAC DIRECT MAIL**

Mailing Address 8048 HILLRISE COURT

City State

ELKRIDGE

Zip Code

MD

21075

Outstanding Balance Beginning This Period

2320.90

Transaction ID : SD10.4361

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2320.90

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**WASHINGTON INTELLIGENCE BUREAU**

Nature of Debt (Purpose):

**PAC CAGING AND DATA PROCESSING SERVICES**

Mailing Address 4128 PEPSI PLACE

City

CHANTILLY

State

VA

Zip Code

20151

Outstanding Balance Beginning This Period

795.42

Transaction ID : SD10.12948

Amount Incurred This Period

0.00

Payment This Period

795.42

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

2320.90

2) **TOTALS** This Period (last page this line number only)..... ►

7398.57

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

7398.57